

Work Order ID 93696

93696

Page 1

November-22-12 2:32:18 PM

Item ID: D3536-25 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: Gasket
 Start Date: 11/22/12 Start Qty: 8.00 *8* Cust Item ID:
 Required Date: 11/30/12 Req'd Qty: 8.00 *8* Customer:
 Reference:

Approvals: Process Plan: MLS Date: 12-11-23 Tooling: _____ Date: _____
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____
 Run Start *NR1*
 Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3536	Rev A

100 FLOW WATER JET 0.00
 100
 Waterjet Memo 0.00
 FLOW CNC Waterjet 1-Cut as per Dwg D3536 Dwg Rev: A Prog Rev: A 2-
 Deburr if necessary

110 QC2- Inspect parts off machine FAI/FAIB 0.00
 110
 QC Memo 0.00
 Quality Control

120 QC8- Inspect parts - second check 0.00
 120
 QC Memo 0.00
 Quality Control



121203

(24) R12-12-1

(24) R12-12-1

24
 (24)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 93696

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Page 2

November-22-12 2:32:18 PM

Item ID: D3536-25 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Gasket
 Start Date: 11/22/12 Start Qty: 8.00 ***8*** Cust Item ID:
 Required Date: 11/30/12 Req'd Qty: 8.00 ***8*** Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location: <u>EP-001</u>	0.00							
130									
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

124 of 111 11/12/04

12/12/58
 mp
 12-12-04

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> </tr> </table> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Engineering <input type="checkbox"/></div> <div>Quality <input type="checkbox"/></div> <div>Other <input type="checkbox"/></div> </div>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>												
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>												
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>												
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>												

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<div style="display: flex; justify-content: space-between;"> <div style="width: 33%;"> <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge </div> <div style="width: 33%;"> <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled </div> <div style="width: 33%;"> <input type="checkbox"/> Other </div> </div>		

Picklist Print

November-22-12 2:32:17 PM

Page 1

Work Order ID: 93696

Parent Item: D3536-25

Parent Item Name: Gasket

Start Date: 11/22/12

Required Date: 11/30/12

Start Qty: 8.00

Required Qty: 8.00

Comments: IPP Rev:A New Issue 07-02-14 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MNEO60S.063 NEOPRENE SHEET 0.063		Purchased	No			100	sf	1,141.2040	0.5956	5.2942224			

B12-12-1

Location	Loc Qty	Loc Code
MAT052	1141.204	
122112	178.494	
122757	162.71	
123761	800	

(24)

123761

NCR: Yes / No

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Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data	<input type="checkbox"/>										
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Setup	<input type="checkbox"/>										
Other	<input type="checkbox"/>										
Process	<input type="checkbox"/>										
Supplier	<input type="checkbox"/>										
Training	<input type="checkbox"/>										
Unapproved	<input type="checkbox"/>										

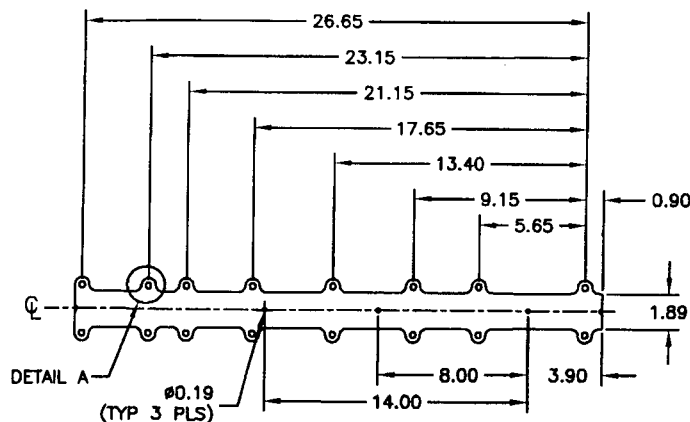
FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

DART

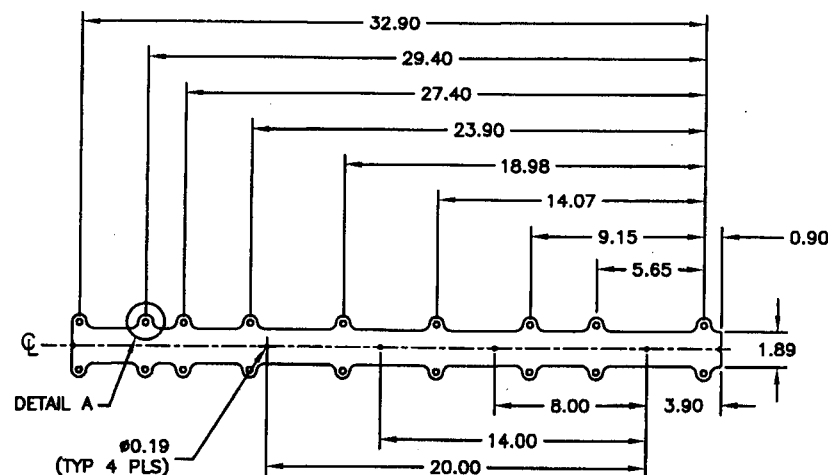
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CB	CB	PORT HADLOCK, WA	
CHECKED PH	APPROVED [Signature]	DRAWING NO. D3536	REV. A
DATE 06.10.25	TITLE GASKET	SHEET 1 OF 6	
A	06.10.25	NEW ISSUE	SCALE 1:10

RELEASED
09.02.12-11

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO CANCELLATION
WITHOUT NOTICE
WORK ORDER
NO. 93696 MLC
12-11-23



D3536-11 GASKET



D3536-13 GASKET

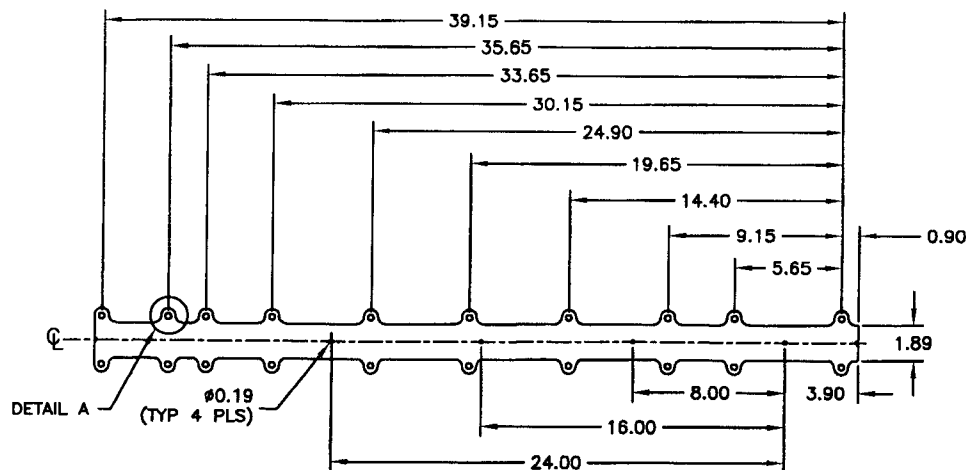
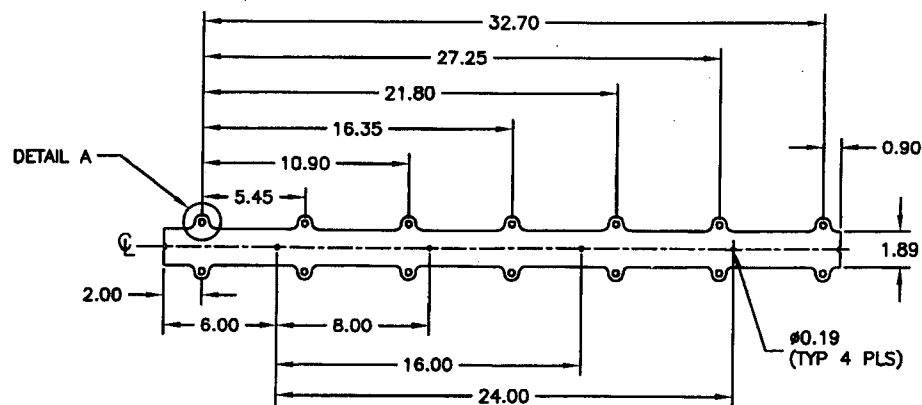
NOTES

- 1) MATERIAL: BLACK NEOPRENE SHEET, 1/16 THICK, 60 DUROMETER (REF DART SPEC. M-NEO60-S.063)
- 2) FINISH: NONE
- 3) PART IS SYMMETRICAL ABOUT ϕ
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) ALL DIMENSIONS ARE IN INCHES
- 6) IDENTIFY WITH DART P/N USING A WHITE FINE POINT PERMANENT INK MARKER
- 7) SEE PAGE 6 FOR DETAILS AND SECTION

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CHECKED	AK	APPROVED	AK	PORT HADLOCK, WA
DATE	06.10.25	DRAWING NO.	D3536	REV. A
		TITLE	GASKET	SHEET 2 OF 6
				SCALE 1:10

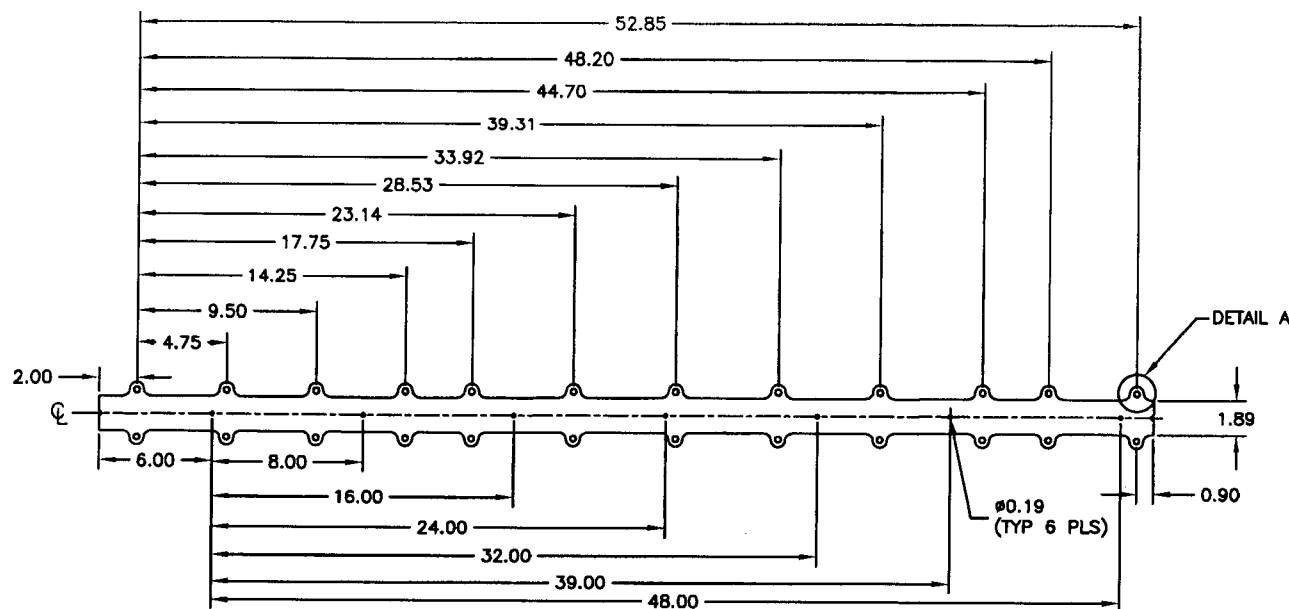
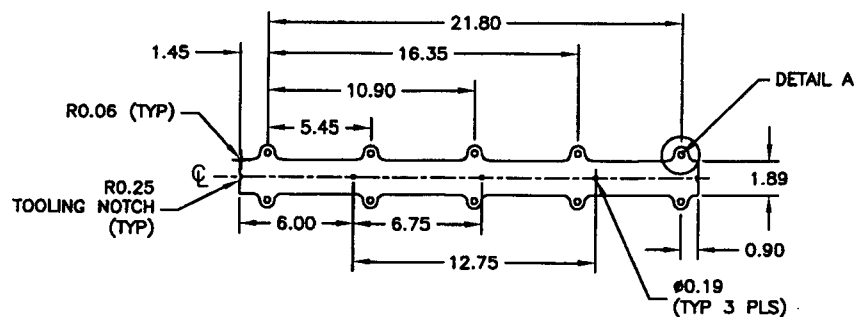
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- 2) FINISH: NONE
- 3) PART IS SYMMETRICAL ABOUT ϕ
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- 6) IDENTIFY WITH DART P/N USING A WHITE FINE POINT PERMANENT INK MARKER
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93626

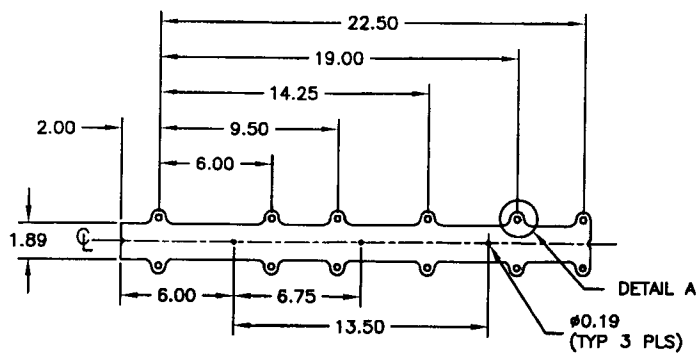
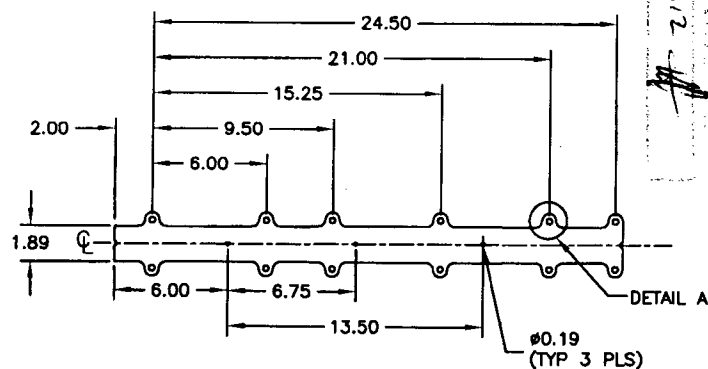
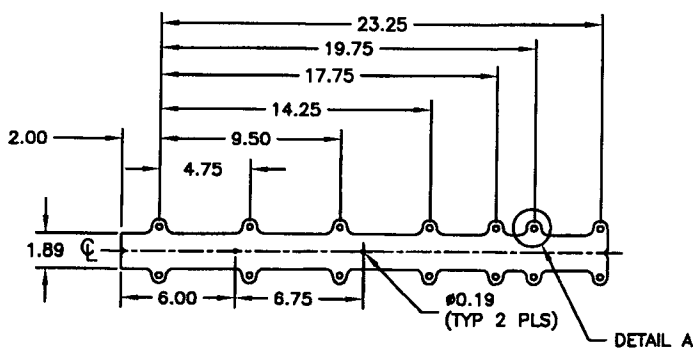
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DESIGN CB	DRAWN BY CB	DART AEROSPACE USA, INC. PORT HADLOCK, WA
CHECKED PH	APPROVED PH	DRAWING NO. D3536
DATE 06.10.25	TITLE GASKET	REV. A SHEET 3 OF 6
	SCALE 1:10	

**D3536-23 GASKET****D3536-25 GASKET****NOTES**

- 1) MATERIAL: BLACK NEOPRENE SHEET, 1/16 THICK, 60 DUROMETER (REF DART SPEC. M-NEO60-S.063)
- 2) FINISH: NONE
- 3) PART IS SYMMETRICAL ABOUT C
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) ALL DIMENSIONS ARE IN INCHES
- 6) IDENTIFY WITH DART P/N USING A WHITE FINE POINT PERMANENT INK MARKER
- 7) SEE PAGE 6 FOR DETAILS AND SECTION

93696

DART**D3536-31 GASKET****D3536-33 GASKET****D3536-35 GASKET****NOTES**

- 1) MATERIAL: BLACK NEOPRENE SHEET, 1/16 THICK, 60 DUROMETER (REF DART SPEC. M-NEO60-S.063)
- 2) FINISH: NONE
- 3) PART IS SYMMETRICAL ABOUT ϕ
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) ALL DIMENSIONS ARE IN INCHES
- 6) IDENTIFY WITH DART P/N USING A WHITE FINE POINT PERMANENT INK MARKER
- 7) SEE PAGE 6 FOR DETAILS AND SECTION

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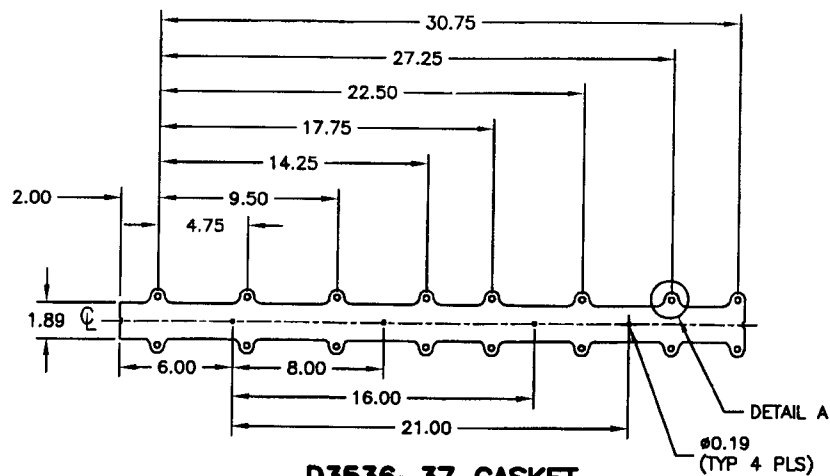
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DESIGN	CB	DRAWN BY	CB	DART AEROSPACE USA, INC.
CHECKED	AT	APPROVED	AT	PORT HADLOCK, WA
DATE	06.10.25	DRAWING NO.	D3536	REV. A
		TITLE	GASKET	SHEET 4 OF 6
		SCALE	1:10	

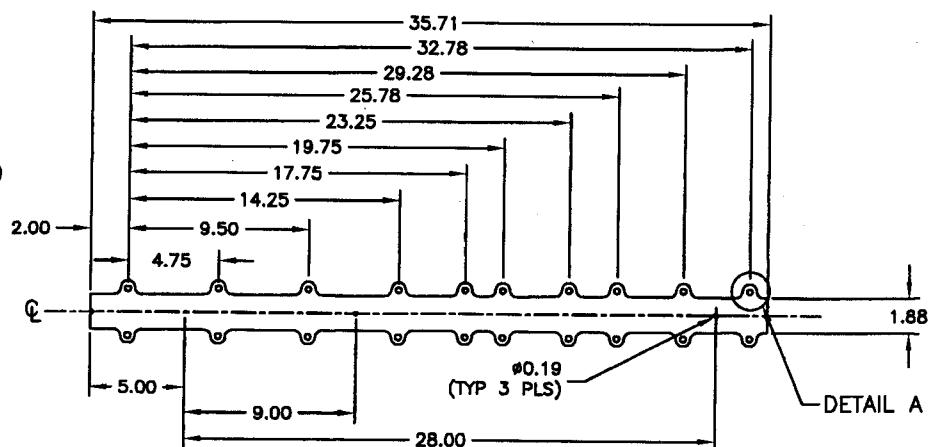
93696

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CHECKED	PH	APPROVED	PH	PORT HADLOCK, WA
DATE	06.10.25	TITLE	D3536	REV. A
			GASKET	SHEET 5 OF 6
				SCALE 1:10

**NOTES**

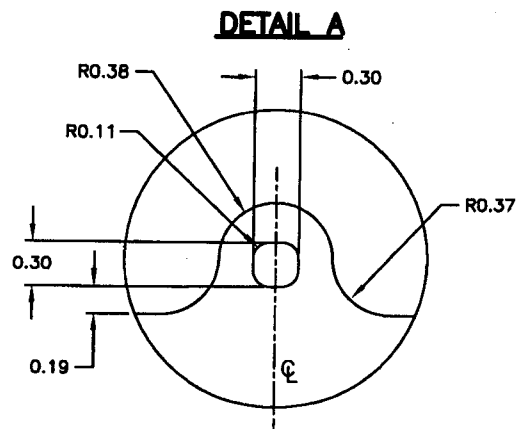
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- 2) FINISH: NONE
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DESIGN CB	UNKNOWN BY CB	DART AEROSPACE USA, INC. PORT HADLOCK, WA	
CHECKED PH	APPROVED <i>[Signature]</i>	DRAWING NO. D3536	REV. A
DATE 06.10.25		TITLE GASKET	SCALE 1:10
		SHEET 6 OF 6	

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